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7590

06/30/2004

Christopher L. Holt
 WESTMAN CHAMPLIN & KELLY
 International Centre - Suite 1600
 900 South Second Avenue
 Minneapolis, MN 55402-3319



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Christopher L. Holt

(Depositor's name)

(Signature)

8/31/04

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/007,284	11/09/2001	Jan Weber	S13.12-0125	4955

TITLE OF INVENTION: CERAMIC REINFORCEMENT MEMBERS FOR MRI DEVICES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	09/30/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
SHAW, SHAWNA JEANNINE	3737	600-423000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Westman, Champlin, &
 Kelly, P.A.

2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Scimed Life Systems, Inc.

Maple Grove MN

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee☒ Advance Order - # of Copies

3

4b. Payment of Fee(s):

☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 23-1123 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

Christopher L. Holt

8/31/04

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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

First Named

Inventor : Jan Weber

Appln. No.: 10/007,284

Filed : November 9, 2001

For : CERAMIC REINFORCEMENT
MEMBERS FOR MRI DEVICES

Docket No.: S13.12-0125



Batch No: 4955

Allowed: June 30,
2004

Group Art Unit: 3737

Examiner:

S. Shaw

CERTIFICATE OF MAILING

Mail Stop Issue Fee

Commissioner for Patents
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Alexandria, VA 22313-1450

Sir:

Submitted herewith is our check in the amount of \$1639.00 as payment of the Issue and Publication Fee in the above-identified application and Advanced Order for 3 soft copies of the issued patent, along with the Issue Fee Transmittal.

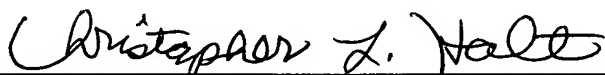
In the event the attached check is unacceptable, or the check is omitted, or if there are any additional fees associated with this application, please charge the required fee or credit any overpayment to Deposit Account No. 23-1123.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on **August 31, 2004**.

Respectfully submitted,

WESTMAN, CHAMPLIN & KELLY, P.A.

By:


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